

Policy: 4250 Procedure: 4250.03

Chapter: Suicide Prevention Rule: Suicide Prevention -

Mortality Review Process

Effective: 02/07/06

Dated: 10/28/05

Replaces: 4250.03

Policy and Forms

Purpose:

The Arizona Department of Juvenile Corrections (ADJC) shall conduct a mortality review for every completed suicide, as well as a life threatening or serious attempt. This review shall be separate and apart from other formal investigations that may be required to determine the cause of death.

Rules:

1. Critical Incident Debriefing:

In the event of a completed suicide or life threatening or serious suicide attempt as defined in the <u>Policy 4250 Suicide Prevention</u>, the **FACILITY SUPERINTENDENT OR, IN THE COMMUNITY, THE COMMUNITY CORRECTIONS ADMINISTRATOR** shall ensure that Critical Incident Debriefing occurs and that Form 1190.02A Incident/Critical Incident Debriefing, Sections One through Six, is completed as soon as practical, but no later than five working days following the incident:

- a. The Critical Incident Debriefing shall be multidisciplinary and minimally include representatives from:
 - i. Facility Superintendent or Community Corrections Program Administrator;
 - ii. Housing Unit Manager;
 - iii. YPO III Case Worker or Parole Officer;
 - iv. Clinical employees involved with the juvenile;
 - v. Security;
 - vi. Mental Health;
 - vii. Medical;
 - viii. Education:
 - ix. Health Unit employees; and
 - x. Any affected employee as determined by the Administrator.
- b. Issues to be discussed at the debriefing include but are not limited to:
 - i. A review of the circumstances of the incident;
 - ii. The effect of the incident on involved employees and juveniles;
 - iii. The cause or potential causes of the incident;
 - iv. Identification of known or potential deficiencies in operational procedures and/or practices including:
 - (1) Circumstances leading up to the incident;
 - (2) Response to the incident; and
 - (3) Follow-up and notification after the incident.
 - v. Need for immediate corrective action and steps taken;
 - vi. Specific employee training issues;
 - vii. Review of other options that were possibly available in resolving the incident;
 - viii. Identification of appropriate and/or extraordinary responses by employee or juveniles;
 - ix. Assignments and delegation of report writing, including Incident Reports, and investigations, interviews, etc.;
- c. The **SUPERINTENDENT OR COMMUNITY CORRECTIONS PROGRAM ADMINISTRATOR** shall act as chairperson of the debriefing session:
 - i. Meetings shall take place in a setting away from distractions; such as, a meeting or training room;

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- ii. There shall be sufficient resources (chalk board, paper, markers, etc.) to diagram and/or list information:
- iii. ALL PERSONS INVOLVED IN THE INCIDENT, AS AVAILABLE, shall attend the debriefing session;
- iv. The SUPERINTENDENT OR COMMUNITY CORRECTIONS PROGRAM ADMINISTRATOR shall designate an employee to complete Form 1190.02A Incident Debriefing;
- v. The **SUPERINTENDENT OR COMMUNITY CORRECTIONS PROGRAM ADMINISTRATOR** shall ensure that:
 - (1) All completed debriefing forms are reviewed for thoroughness, accuracy, grammar, etc., prior to distribution;
 - (2) Distribution of the completed debriefing form is forwarded to the following staff within 24 hours of the conclusion of the debriefing session:
 - (a) Director;
 - (b) Deputy Director;
 - (c) Quality Assurance Administrator
 - (d) Assistant Director for Safe Schools;
 - (e) Clinical Director;
 - (f) Community Corrections Program Administrator;
 - (g) Superintendent of Education;
 - (h) Facility or Parole Office Management Team members; and
 - (i) Involved Housing Unit Manager or Parole Supervisor.
- 2. By the 21st day following completion of the Critical Incident Debriefing, the SUPERINTENDENT OR COMMUNITY CORRECTIONS PROGRAM ADMINISTRATOR shall forward to the Quality Assurance Administrator and the appropriate Assistant Director or Program Administrator Form 1190.02A Incident/Critical Incident Debriefing, with Section Six updated and Section Seven completed, detailing all action taken as a result of the Critical Incident Debriefing. S/HE shall identify and list in this report:
 - a. Any trends or areas requiring immediate attention, as appropriate:
 - b. Any corrective action taken;
 - c. Any commendations; and
 - d. Any recommended revisions or additions to existing policies and procedures.

3. Internal Review Committee:

- a. Within 30 days following a completed suicide or life threatening or serious suicide attempt by an ADJC juvenile, the Quality Assurance Administrator shall convene an Internal Review Committee including the following employees minimally:
 - i. Quality Assurance Administrator (Chairperson);
 - ii. Assistant Director for Safe Schools;
 - iii. Community Corrections Program Administrator;
 - iv. Clinical Director or Clinical Services Administrator;
 - v. Education Superintendent or Education Transition Coordinator, or designee;
 - vi. Medical Director:
 - vii. Legal System Assistant Director or designee;
 - viii. Chief of Psychiatry;
 - ix. Facility Administrator; and
 - x. Representatives from outside of the agency as indicated by the case to be reviewed.
- b. The INTERNAL REVIEW COMMITTEE shall:
 - i. Critically review the circumstances surrounding the incident;
 - ii. Critically review the facility or community procedures relevant to the incident;
 - iii. Critically review any Incident Debriefing report(s);
 - iv. Review all relevant training received by involved employees;
 - v. Review all pertinent supervision and treatment plan reports;
 - vi. Review all pertinent medical and mental health services involving the victim;

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- vii. Review pertinent family dynamics; and
- viii. Recommend possible improvements in:
 - (1) Employee training;
 - (2) Operational procedures;
 - (3) Physical plant; and
 - (4) Program Services.
- c. The **INTERNAL REVIEW COMMITTEE** shall not take the place of any legal investigation process or any judicial procedures or remedies;
- d. The **INTERNAL REVIEW COMMITTEE** shall produce a report for the ADJC Director within 30 days of convening.

Effective Date:	Approved by Process Owner:	Review Date:	Reviewed By:
02/07/06	Kellie Warren		